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Executive Director
Sandra Fitzpatrick

FULL COMMISSION MEETING MINUTES

June 7-8, 2005

**Lionsgate at McClellan Park
3410 Westover Street
Sacramento, CA 95852**

Chair: Nancy Dolton

- I. Commissioner Dolton called the meeting to order. Ayala led the group in the pledge.
- II. Roll was taken. Present were Dolton, Lambrinos, Ayala, Dennison, Esquivel (Tuesday only), Glavaz, Goode, Kim-Selby, Lacayo, Latimer, Lundeen, Ross, Schachter, Scharlach, Wyman (Tuesday only), Yee (Wednesday only). Absent and excused were Acosta, Chen, Karr, King, and Pynoos. Wong was absent unexcused.
- III. Introductions – none
- IV. Approve Agenda – Ayala moved, Lambrinos seconded, that the agenda be approved. Motion carried.
- V. Approve Minutes: Minutes were not approved due to the delay in posting to the website. This should be resolved in September.
- VI. Public Comment – None
- VII. Chair's report – executive committee considered CSL bills. The results include:
 - AB 205 – Support
 - AB 249 – No position
 - AB 778 – No position
 - SB 209 – Support
 - SB 374 – Support
 - SB 397 – Support
 - SB 1018 – SupportThe following recommendation was made: The CCoA reiterates its policy for legislative review of CSL proposals must include (1) representative of CSL legislative committee in attendance and (2) background materials supplied to the CCoA in advance.

Interim changes in the bylaws are recommended for the election/nomination procedure for officers – due to our CCoA meeting being held in conjunction with the C4A conference at the end of November, holding elections in December is problematic. This will be on the agenda in Santa Barbara in September.

Ayala moved, Jorge seconded approval of acceptance of executive committee report.

VIII. Executive Director's report – written report

A. CCoA Activities

The CCoA moving in July, date may still be fluid.

Staff met with Age Concern – England representative.

B. Financial Statements – both the CCoA and TACC carried forward money to 2005-06 budget, the CSL has overspent in some line item, but overall they are within budget. CCoA/TACC's budget is being prepared combined for 2006-07, and a separate 2006-07 budget for the CSL.

C. The CSL transition –

Efforts to find new administrative entity has been hampered by changeover in leadership.

Option 1 – Controller – too costly

Option 2 – CDA – rejected opportunity

Option 3 – DGS – still positive; however, most likely will be costly as Controller

The CCoA has the obligation to inform the entire CSL membership of the importance of 2006 date. The CCoA will keep Legislators, Secretary of HHSA, and the Governor's Office apprised of what is happening as part of our responsibility. The TACC and C4A members need to be informed as well. The CCoA has been and will continue to document all its actions related to separation. This is a business matter needing to be addressed NOW. Commissioners have responsibility to influence the CSL about the seriousness of the situation. The CSL is in danger of destroying itself by inaction. Commissioners will be given the information sent to the CSL. Commission staff/leadership continues with formal strategy, informal strategy is Commissioners individually discussing their concerns with individual CSL members. The CSL is moving to a new office in Senate Rules at end of June 2005.

D. Letter on State Plan was submitted to the CDA.

E. Report of White House Conference on Aging – Delegate Selection Activities: Commission still working out details/budget for delegate training. The CCoA will gather outside resources for training.

IX. LRSPA Committee report – (see written recommendations)

The CCoA needs to focus on monitoring side of SB 910 plan. (See written action plan suggested by Commission's committee on LRSPA). Comments on the recommended action plan:

- ❖ Hearings are necessary, be smart about them. Area Agencies' roles in the hearings needs to be well defined. A new structure for hearings could be very direct questions for the AAA to answer, directed at the issue at hand. Whose task is it to look at federal recommendations in the Strategic Plan – will there be information for the WHCoA delegation on the recommendations in the Strategic Plan?
- ❖ Local efforts – maybe the CCoA could encourage local organizations to do more in implementation of the strategic plan. The CCoA can't go to every county; however, need to pull partners in like the League of CA Cities.
- ❖ Enterprise Organization (kids in high school available during the summer to do volunteer work) could call every city, find out what their aging program is and invite them to check out our website. This could be an ongoing internship program.

- ❖ The CA Legislative Intern program is also an option (get one of their interns, place them with us – they get paid).
- ❖ Commissioners can serve as information reporter to local areas on what the CCoA is doing.
- ❖ Empowering/enabling role is important and should be the focus, not implementation.
- ❖ The CCoA should do five to six legislative hearings – Transportation/Housing/other topics, etc...
- ❖ Prop 65 is important; the CCoA needs to be at the table on this issue.

Legislative Hearing – will be held on June 21 in Assembly Committee on Aging and Long Term Care at 2pm. The CCoA will present the Report to the Legislature at the hearing, hopefully there will be Senate involvement in the hearing.

X. Panel 1 – State Perspective, Lora Connolly, Ben Harville, Allison Ruff, Robert McClaughlin.

Questions 1& 2: “Are there other items that you believe the CCoA should put on its priority list? Which of the items on this list (or what you added), do you believe the CCoA should put resources and energy into?”

- ❖ The CCoA should take on roles related to Legislature/Legislative initiatives and process. The CCoA should have close relationship with Legislature and members. This will heighten profile in administration and take advantage of advocacy opportunities.
- ❖ Overall comments, prioritizing, what are the unique issues that the Commission can take on that other groups cannot address, use that framework. When designing framework, we should hope for the angels, design for the sinners! One example of an issue that other (state) groups cannot address is Guardianship. Because these issues are under the court system locally, no one else is doing it or has the authority to do anything about it.
- ❖ Whatever the Commission takes on, make sure you can *add value* to the system. For example the SILC, appointed bodies have opportunities and restrictions. Appointed advisory groups are not in positions many times to do advocacy.
- ❖ Look at CCoA’s strengths, where are gaps in the current system... We need stronger advocacy among senior groups, needs to be present and LOUD!! Ties to other organizations, appointed bodies give some weight even though challenged. This role would be more than just writing letters in support of bills, but really becoming involved. Make calls, visits to capitol offices, be at rallies, have clear priorities. There is a lot to be learned from disability rights groups. Broadening CCoA’s scope and bringing in new partners. The CCoA is in the ideal position to build that advocacy network among all aging groups and disability groups. Develop parameters/purpose around some of the topics.
- ❖ Should we be a monitoring organization and advocacy, can we carry the message?
- ❖ Keep thinking in terms of *value added*! 1. Ability to do field hearings, best practices, local solutions, move these findings up to the state level... monitoring visits from CDA, it is hard to glean this information, doesn’t come through as clearly as when CCOA goes out and asks for this input. 2. Special events, focused on policy issues, bringing together policy experts, sharing innovative practices, etc. This is meaningful that can be transferred to state level. The CDA has taken its four year plan – created objectives – and will develop a business plan around each objective and update progress on yearly basis. Legislature is also asking for accountability on

a yearly basis from CDA. How much monitoring is useful, AoA, Bureau of State Audits, Legislative, etc. Is now the time to be biting at the heel if things are really bad, or not? Is that value added??

- ❖ Ed Roberts, icon in independent living business, founder of first Berkeley ILC. Formed World Institute on Disabilities says three most important functions are advocacy, advocacy and advocacy. SILC stopped funding individual services and started funding an advocacy network. The advocacy network is funded through the state independent living council. A challenge of aging advisory councils, is that people charged with the advocacy aren't in a good position to do it, they are governmental, have to get permission to do it from their boss up above, AAA's are the same way! SILC funds organizations that didn't have to have positions cleared to do the advocacy. SILC did not try to take the lead in advocacy, but rather to fund it. The current network costs less than two million dollars a year.
- ❖ Advocacy is the biggest piece that the CCoA should take on. Use a SWAT analysis approach, use as a strategic planning tool. What else is already being done? Could TACC become leaders in doing local public hearings? Can some groups take one piece of the puzzle while the Commission takes the lead in others? Hopefully the CSL transition will not be on the CCoA's activity list for very much longer. Advocacy is needed long term.
- ❖ 1. Advocacy, 2. State Plan Monitoring, 3. LRSPA monitoring, 4. Special events, 5. field hearings are top choices of activities.
- ❖ The CCoA serves as principle advocacy body on behalf of seniors in the state. This is a great statutory line which gives a lot of strength to the Commission. Where does the CCoA fit in the administrative structure? Figure out how to improve this structure for older Californians.

Question 3: "Is there a role for the CCoA to play in furthering a joint advocacy agenda between aging and disabled groups (i.e. beyond "reaction" to budget, legislation, etc.)"

- ❖ Coordinated leadership conference is extremely important. We need to be less uneasy with each other. The overlap between aging/disability groups is on the common interests in LTC. Sometimes aging groups work in opposition in the disability community, however they meet and work out things before they go into the public eye. The day we reach integration between aging/disabled communities is a powerful day!
- ❖ Joint advocacy has to move beyond the budget, there are bigger issues, Olmstead, LTC integration.
- ❖ Aging/disability groups need to lighten up, so many mutual goals. Joint advocacy goals, unified front makes a VERY GOOD case in the Legislature. It is an invaluable role for the Commission. Mutual goals being pursued that kill multiple birds with one stone, give Legislature bang for their buck for supporting your joint legislation.
- ❖ Advocacy is a TON of work. Really effective advocacy includes good policy analysis, information gathering, developing strategy, then communicating the strategy. The CCoA, if it chooses this route, needs to focus on key policy issues; prioritizing given the resources it takes.

Question 4: "Given that the CCoA has just competed its first monitoring role of the Long Range Strategic Plan, what could we do to improve our role, or is this role even necessary?"

- ❖ Master plan on aging is an opportunity, tying this into it. CCoA is the institutional memory in the Legislature on the SB910 plan. What is being developed currently

that is in line with LRSPA? Someone needs to carry the torch on this. We may not have money to spend on implementation of Strategic Plan elements until seven to eight years from now. Role will fall to the CCoA or it will not get done.

- ❖ The continuity role is enhanced in term limits environment. A nice appropriation would support CCoA's ability to guide the Legislature and other decision makers towards objectives in greatest interest to people of California. Now is a critical time to do this.
- ❖ LRSPA/Olmstead similar plans, lots of objectives, no resources to implement. Key issue areas are identified, but unfunded mandates are created. Over time, specific recommendations will get dated. Broader issue areas will be ongoing and we all need to be held accountable to these.
- ❖ A plan without resources to be implemented is like the vice-presidency, is not worth anything. Federal law mandated planning process in SILC, there are joint resources to administer, and joint to plan. One million discretionary dollars a year are given to the SILC. CCoA's planning process has worn people down, right on the heels of LRSPA, CCoA went into another monitoring process. There was so much planning and not much results... what is the *value added*? Find a source of money that will allow us to try some things. In an era where there are not resources, focus where resources are, then look at the value added. Leverage a small pocket of money and make sure the results will work for all communities. The ship is going out on LTC integration, this could be an issue to jump on.
- ❖ **Brenda Primo comments: (get from Sandi)**
- ❖ Is a 25-member body as functional as one leaner and meaner one? Something like seven to nine people, gerontologists, economists, great deal of influence, social science background may be better. This would result in enhancement of better public policy; something like the Little Hoover Commission, they take on an issue and look at what the Legislature can do, making important recommendations. It is difficult to understand the complexities of the policy realities (for example transportation), look at health care and health care system, etc. CCoA's size is a lot of people for two to three people to staff. Issues are raised that just dissipate because of limited staffing, etc.
- ❖ It is very hard to get legislation introduced that is just 'clean up' of statute related to the CCoA. Our role in relation to the CSL could be clarified. There are three provisions that are specific with the Commission and CSL. Adult day health care program language needs cleaning up. A lot of the language related to the role of the CCoA is certainly good and broad, you don't want to restrict yourself. Role for state plan involvement is an area needing discussion.
- ❖ CSL language will go out after July 1, 2006. Other statutory changes, we don't want to put things in statute that don't need to be there. Keep statute broad. Figure out what we want our role to be, then consider what (if any) statute is needed to make that happen.
- ❖ Be tempted to throw out what statute says. Decide what we want to do, then get rid of something that is not relevant in statute. Start with a clean slate. Rethink the role without something specific. The law is OURS.
- ❖ How do Commissioners pursue difficult policy objectives in the Legislature (health, transportation, housing)? Best way is to have someone guide you through what to put in a bill. Identify policy objectives, steps, etc. If there is an issue the CCoA takes on, do it in a dedicated way. Get down to the brass tacks and refine it.

- ❖ What should the make up be; current is Legislature/Administration 6 vs. 19 appointees. There should be equal investment by the Legislature, Senate, and Administration (3,3,3). Better balance could help with receptivity in the Legislature.
- ❖ Think about who are the folks that are chomping at the bit to work on these issues with you.
- ❖ Approach to housing/transportation is different than health care. Health care is a state issue. At state level, housing/transportation are not effective at facilitating change, rather innovations in these issue areas are happening at the local level.

Panel 2:

Question 1 & 2 response:

- ❖ Should a new emerging issue come up, we can address that issue. Advocacy is critical, should be number 1 importance. State plan monitoring is very important. LRSPA – monitoring and education should go hand in hand. Field hearings provide an opportunity for visibility. The CCoA should incorporate our hearings into statewide conferences, coordinated leadership, and allied conference to lend us more credibility. WHCoA – short term project. Support for TACC is a critical area needing the CCoA's attention.
- ❖ Applaud Commission for self-evaluation, developing strategic planning. It is risky. Key functions in statute include: advisory function is evident throughout the statute. Statute is unclear whether we are advisory to those that appointed us... advocacy doesn't always mean lobbying!!! It is difficult, confusing to lobby those that we are advisory to. There is a glaring missing function – nowhere is the word leadership role, or leaders.
- ❖ CA Seniors Coalition – advocacy on issues. Membership is asked to take a stand on issues. There are overriding issues we can take a stand on. Commission needs to be more aware of issues and take a stand on issues. Commission has institutional ties to legislature, administration, local providers, advocacy organizations, federal programs. This creates problems and opportunities. We need to have more visibility to speak for ourselves. The CCoA can act as a convener and priority setter for all the different groups.
- ❖ What is the effectiveness of being political appointees? How do you measure effectiveness? Once appointed, what is it that we wish to do with this position? What is your goal in being a Commissioner? What would one have to lose? Be fearless, we are principle advocates at state level. Leadership is not stated, but implied. Use your choice of methods to act on these issues.

Question 3:

- ❖ Disability community is an example as to how they view advocacy... their goal is not to be the voice of the constituency, but rather how to empower those people to be advocates for themselves. Advocacy IS finding a way to educate constituency, provide them the information about the issues, teach them how to access the system...empower and coordinate these activities. Empower to be their own strong advocate. They do not 'speak' for their constituency. We in the aging community are 'too paternalistic' in trying to speak for our constituents. The role of the Commission is not to walk the halls of the capitol, etc. Identifying the issues, providing an understanding and analysis of information, coordinating that. Mostly, empowering. Does the Commission do this? Should the commission work on joint advocacy? How broadly does the CCoA define LTC? Do we look at all programs

regardless of who the programs serve? Whether or not we can be part of being a joint advocacy agenda depends on how we define these issues.

- ❖ Aging people continue doing everything they've always done. When we become disabled we share the problems of the disabled community very much. There are a number of prejudices about age and disability that hinder us working together.
- ❖ We've come a long way in last 10 years. Need to look at integrating aging/disability services programs. In San Francisco, there was a lot of resistance to this idea. We did not want the senior programs threatened. Now, have we come so far that because other people are doing it, have we made accomplishments? We need to keep doing this, we have the thinking from different parts of the state as far as how aging/disabled groups are working together in successful models. We've identified values in a state plan that is joint... we're that much further along.
- ❖ If what we are about is an integrated service delivery system (stakeholders), seamless system, then we can't look at that from an aging or a disability stand point, rather joint.

Question 4:

- ❖ This role is extremely important. If no one follow up, the plans don't get implemented.
- ❖ Look for funds to allow greater follow up, technical assistance, CA Healthcare Foundation, CA Endowment. Since this is a policy document, and the federal government is providing funding, different counties need funding to take it from policy to local implementation. Can we assist counties with implementation and share information? Then we need to take it nationally, great models to be replicated. One example: Santa Clara County – use of virtual protected network technology, like using a credit card, swipe it, and authorize purchase. Same technology should be applied to case workers in the field. Medicare/Medicaid HMO system to link population to health/social services together. Network of Care is another example of this innovation.
- ❖ This is an example of what the CCoA could grasp as a 'leadership' role. This state has needed one for many years. It is appropriate that the plan was put in the lap of the Commission. It is a way for the CCoA to develop its leadership role in the state. Try to figure out how to coordinate/integrate/ this plan with Olmstead plan. This is meaningful from a broader perspective.
- ❖ The CCoA should use LRSPA as a filter or lens by which CCoA can weigh proposals against the goals outlined in the plan and speak honestly about whether individual, incremental actions are furthering or impeding the goals laid out in the Long Range Plan.

Question 5:

- ❖ No, statute is fine as is, it is more important to identify priorities and what we are going to do about it. Less concerned with membership, appointed by whom. Need to establish priorities, action items. Develop business plan and choose to follow through.
- ❖ W&I Code: involved in intra-state funding formula - recommended take out of statute. Coordinating agency for all programs in state??? Outpatient medical services statutes are confusing. The term leadership needs to be included and stated that we are the leader with aging issues in the state.
- ❖ The CCoA needs to be more active in lobbying the Legislature. Staff should mobilize members of the Commission. Organize and schedule visits, prepare (even borrow) short background papers on key pending issues, create talking points, and

help members report back to the full body on results. We could invite an elected officer come to every meeting.

Questions by Commissioners:

- Possible, can we utilize groups of three of us (Commissioners) – study seven to eight topics, would this be a useful way to get us more focus? May be one effective method to engage participation. When in doubt always create committees. Recommended that having the website, we use it to teach people what the issues are, who to contact, this is much more valuable than having a Commissioner come up and speak.
- Advocacy is three different aspects – advocates to the people who make decisions (Legislature), advocating to the administrative agencies, advocating to the general community on senior issues (educate the whole community on senior issues).
- One way to bring together aging/disabilities, mental health, disabilities, aging, all to talk about their own plans. Executive Directors at that time didn't even know who each other was. Executive Committee could meet once with leadership of other organizations.

XI. Discussion of panels 1&2.

- Structure/purpose of field hearings needs to be looked at.
- Legislation – lobby or don't lobby, mixed messages.
- WHCoA – post WHCoA activities will be challenging to decide how much time to dedicate.
- Special events are important.
- What can we learn from disability community
 - ❖ Education/training is important.
 - ❖ Advocacy is important, but not everything, we need to be leaders.
 - ❖ CCoA does not set the agenda for aging folks (diminishing of protections and programs that affect seniors). We do not meet our responsibilities unless we address issues on front page of newspapers today, being responsive in the struggles taking place right now.
 - ❖ Advocacy is the most important.
 - ❖ Activism/lobbying/advocacy
 - ❖ Confusion between types of advocacy, we need to take leadership, make a bigger presence in the community.
 - ❖ Increase visibility as a starting point. Strength depends on what the individual can do, how can they contribute.
 - ❖ We are short on staff, get more money for staff. Commissioners should be coordinated across the state to work with advisory councils/public officials.
 - ❖ Dissonance between the panelists on the way of looking at the world, can't step in and have a good idea on how to attack the problem. WE need to have four to six foci where Commissioners can really focus on an area that they KNOW about.
 - ❖ We can be leaders if we are conveners to make best use of resources. We have that role, no one else is carrying this role. We MUST be advocates. People empowerment was good, our role is through function as conveners with area agency executive directors, advisory councils and TACC. We need to build a relationship with AAA directors and AC's (TACC members come and go).
 - ❖ Role of an advocate never ceases.

- ❖ Format of having department people tell us ways the CCoA could be helpful was valuable.
 - ❖ Different format for discussions with leadership is an important comment.
 - ❖ Commission needs to earn recognition; somehow, we're not getting the message out.
 - ❖ Commission roles are not easily defined.
 - ❖ Clear expectations are needed for Commissioners, and an executive committee that keeps us all in line, raise the bar of expectations so Commissions rise to meet them.
 - ❖ News media should be included in our planning, implementation of our agenda.
- XII. Working Dinner: Commissioners offered their unique perspectives about expectations when they came on the commission, their background, passions related to the Commissions, and whether or not these expectations had been realized and/or fulfilled.
- XIII. The meeting adjourned at 8:30pm.
- XIV. The Commission reconvened at 8am, June 8th.
- XV. Executive Director Sandi Fitzpatrick lead the group in a review of CCoA's strengths, weaknesses, opportunities, threats, and challenges:

STRENGTHS:

- ❖ Diversity of Membership/Skills
- ❖ Tie to leaders – statutory defined roles, access to power
- ❖ Past successful efforts and track records
- ❖ Flexibility
- ❖ Commitment

WEAKNESSES:

- ❖ Appointed body
- ❖ Lack of visibility
- ❖ Statutory requirements exceed resources – too much
- ❖ Under utilization of Commissioners, coordinated effort of Commissioner involvement
- ❖ Personal limitations (working commissioners, 60hr workweek, human frailty)

THREATS:

- ❖ Potential restructure
- ❖ CSL transition
- ❖ Resources
- ❖ Outside (Gov/Pres) federal program threats
- ❖ Potential change in quality of appointments
- ❖ Too powerful/too effective, viewed as a threat
- ❖ Group vs. individual (example – following CSL session, no follow up)

PROMISING OPPORTUNITIES:

- ❖ WHCoA
- ❖ State Restructure
- ❖ Field Hearings
- ❖ Special Events
- ❖ LRSPA
- ❖ Bring network together
- ❖ Desire to do – to impact

- ❖ Role in information/education
- ❖ Marketing
- ❖ Legislative advocacy

XVI. Commissioners worked in small groups to identify strategic plan components and goals in the focus areas of WHCoA, bringing the network together, and role of education/information.

XVII. Reports from small groups are as follows:

WHCoA Group:

A preliminary agenda for CA aging organization this fall as it relates to the CA WHCoA delegation would include the following steps:

- ❖ Pre November meeting or e-mailing of delegates, to help select topics to address in delegate training. Consider if there are things gleaned through this e-mail process that the CCoA did not include in initial list of the training topics?
- ❖ Send out a similar letter to the aging network, ask them to weigh in as observers in the November meeting.
- ❖ Post the November meeting, there should be a Pre-WHCoA meeting in Washington to reiterate the CA issues.
- ❖ Northern CA, Central, Southern CA post WHCoA meetings should be held to keeping the ball in the air as those delegates return. Decisions about how things are going to be funded, who is responsible for getting certain pieces of it done are important.
- ❖ Mailings to delegates should include a model press release that was developed for the WHCoA.
- ❖ Post conference public relations should include reaction of the CA delegation, how it is captured. Weave in LRSPA recommendations, pull out the important recommendations to CA and follow up with them, not necessarily publicize all the WHCoA recommendations that CA delegation might not agree with.

Bringing the Network together:

Vision: The CCoA be recognized as a leader in promoting senior issues in CA, with visibility, credibility and partnerships.

- ❖ There is no such thing as bad publicity.
- ❖ Identify one or more priority issues from LRSPA with high visibility and credibility building on Commissioner interest and expertise.
- ❖ Educate public
- ❖ Obtain input and expertise
- ❖ Convene stakeholders
- ❖ Attract dollars from special interests
- ❖ Impact policy and other 'solutions'

Stakeholders include:

Seniors at large

Advocacy organizations (OWL, AARP, Congress)

Providers (for profit, not for profit)

Public programs/administrators

Funders (Endowment, Health Care Foundation, Archstone, Moore)

Legislators

AAA's

Local officials

Credibility:

- ❖ Access to power (Assembly Speaker)
- ❖ Access to expertise (academics)
- ❖ Commissioner experience and expertise
- ❖ Ability to impact policy
- ❖ Ability to mobilize public opinion

Field Hearings:

- ❖ Broader representation and involvement

Visibility examples:

- ❖ Inform AAA's re CCoA activities on their behalf
- ❖ Obtain input re AAA concerns
- ❖ Solicit Area Plan Executive Summaries
- ❖ Coordinated Leadership conference
- ❖ Participation in other organizations (TACC, CSL, Congress)

Role of education/information:

Steps to take:

1. Inform the aging network on the commission actions
 - a. Publish 'news from the Commission' every two months (to AAA's newsletters, to consumers who read the newsletters, is there a hot issue we need to put in, two to three messages out on WHCoA). Commissioners should be charged to write the news letters, if it is a policy issue, Andy should put it out, housing, Marvin should do it, etc. etc., then edited by the director.
 - b. Disseminate to aging network news letters and CDA, include in our website.
2. Inform elected and public officials:
 - a. Invite to Commission meeting an elected official as a speaker
 - b. Annual conference to educate Legislators/State officials
3. Update Website –
Update the webpage, include links to other organizations, promote the website! (Colleges, University, Community Colleges should be links.)
4. Develop speakers bureau - Develop a speakers' bureau, rely on expertise of Commissioners, can someone come and talk about Social Security, respond to that.
5. Special Activities:
 - ❖ Conferences and meetings with department heads
 - ❖ Policy papers
 - ❖ Hearings
6. Level of Commission involvement in post-WHCoA environment.

CCoA staff will pull from these ideas into a framework of strategic plan for the Commission's next 18-month activities. Key questions/thoughts are:

What is the role of staff vs. the role of Commissioners?

There is so much to do, it is impossible to do all of it and do it well.

By developing these goals and objectives, we can approach foundations for funding for these activities.

People sat here yesterday told us that the LRSPA is ours. The WHCoA is not ours by a long shot, but there are opportunities to make parts of it ours. WHCoA gives us the opportunity to discuss senior issues.

XVIII. The Commission had worked through lunch in order to adjourn early at 12:30pm.